



Patent
Attorney Docket: 156886-0060

THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:) **Customer No.:** 29000
)
Jeffrey YING) **Confirmation No.** 8497
)
Serial No. 10/646,459) **Group Art Unit:** 2141
)
Filed: August 22, 2003) **Examiner:** Coulter, Kenneth R.
)
For: CONTROL NETWORK WITH) Office Action mailed:
MATRIX ARCHITECTURE)
) June 29, 2006
)

AMENDMENT TRANSMITTAL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith are: 1) an Amendment and Response to Office Action Pursuant to 37 C.F.R. § 1.111; and 2) Terminal Disclaimer for the above-identified application.

- ☒ Applicant(s) petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(4)] for the total number of months checked below:

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
1 month	<input type="checkbox"/> \$60.00	<input checked="" type="checkbox"/> \$120.00
2 months	<input type="checkbox"/> \$225.00	<input type="checkbox"/> \$450.00
3 months	<input type="checkbox"/> \$510.00	<input type="checkbox"/> \$1,020.00
4 months	<input type="checkbox"/> \$795.00	<input type="checkbox"/> \$1,590.00

- ☐ An extension for _____ months has already been secured and the fee paid therefor of _____ is deducted from the total fee due for the total months of extension now requested.

CERTIFICATE OF MAILING UNDER 37 CFR 1.8

I hereby certify that this document (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: October 30, 2006

Sent by: Connie Kwon

Signature: Connie Kwon

- ☒ Extension fee due with this Request \$120.00.
- ☐ **NO ADDITIONAL EXTENSION FEE IS REQUIRED.**

FEES FOR CLAIMS:

- ☐ Applicant claims small entity status under 37 CFR 1.27.

The fees for claims (37 CFR § 1.16(b)-(d)) have been calculated as shown below:

Total Claims	45	-	37	=	8	x	\$50.00	\$400.00
Independent Claims	5	-	5	=	0	x	\$200.00	\$0.00
Multiple Dependent Claims	\$360	(if applicable)					<input type="checkbox"/>	\$0.00
TOTAL OF ABOVE CALCULATIONS								\$400.00
Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28.								\$0.00
								<input type="checkbox"/>
Extension Fee								\$120.00
Terminal Disclaimer Fee								\$130.00
TOTAL FEES SUBMITTED HERewith								\$650.00

- ☐ No additional fee is required.
- ☐ A check in the amount of _____ is enclosed to cover the above fee(s).
- ☒ Charge Deposit Account No. **09-0946** in the amount of \$650.00.
- ☒ The Commissioner is authorized to charge Counsel's Deposit Account No. **09-0946** for any fees required under 37 CFR §§ 1.16, 1.17 and 1.445 that are not covered, in whole or in part, by a check enclosed herewith and to credit any overpayments to said Deposit Account **09-0946**.

Respectfully submitted,

IRELL & MANELLA LLP

By: 

Christopher A. Vanderlaan
Reg. No. 37,747

Dated: October 30, 2006

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